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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/017,652	12/12/2001	John J. Janas III	CLCOCO P01AUS	9321
20210	7590	01/26/2006	EXAMINER	
DAVIS & BUJOLD, P.L.L.C. FOURTH FLOOR 500 N. COMMERCIAL STREET MANCHESTER, NH 03101-1151			TOMASZEWSKI, MICHAEL	
			ART UNIT	PAPER NUMBER
			3626	

DATE MAILED: 01/26/2006

Please find below and/or attached an Office communication concerning this application or proceeding.

<b>Office Action Summary</b>	<b>Application No.</b> 10/017,652	<b>Applicant(s)</b> JANAS ET AL.	
	<b>Examiner</b> Mike Tomaszewski	<b>Art Unit</b> 3626	

-- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --

#### Period for Reply

A SHORTENED STATUTORY PERIOD FOR REPLY IS SET TO EXPIRE 3 MONTH(S) OR THIRTY (30) DAYS, WHICHEVER IS LONGER, FROM THE MAILING DATE OF THIS COMMUNICATION.

- Extensions of time may be available under the provisions of 37 CFR 1.136(a). In no event, however, may a reply be timely filed after SIX (6) MONTHS from the mailing date of this communication.
- If NO period for reply is specified above, the maximum statutory period will apply and will expire SIX (6) MONTHS from the mailing date of this communication.
- Failure to reply within the set or extended period for reply will, by statute, cause the application to become ABANDONED (35 U.S.C. § 133). Any reply received by the Office later than three months after the mailing date of this communication, even if timely filed, may reduce any earned patent term adjustment. See 37 CFR 1.704(b).

#### Status

- 1) ☒ Responsive to communication(s) filed on 12 December 2001.
- 2a) ☐ This action is FINAL. 2b) ☒ This action is non-final.
- 3) ☐ Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under *Ex parte Quayle*, 1935 C.D. 11, 453 O.G. 213.

#### Disposition of Claims

- 4) ☒ Claim(s) 1-20 is/are pending in the application.
- 4a) Of the above claim(s) \_\_\_\_\_ is/are withdrawn from consideration.
- 5) ☐ Claim(s) \_\_\_\_\_ is/are allowed.
- 6) ☒ Claim(s) 1-20 is/are rejected.
- 7) ☐ Claim(s) \_\_\_\_\_ is/are objected to.
- 8) ☐ Claim(s) \_\_\_\_\_ are subject to restriction and/or election requirement.

#### Application Papers

- 9) ☐ The specification is objected to by the Examiner.
- 10) ☒ The drawing(s) filed on 05 March 2002 is/are: a) ☒ accepted or b) ☐ objected to by the Examiner.  
Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).  
Replacement drawing sheet(s) including the correction is required if the drawing(s) is objected to. See 37 CFR 1.121(d).
- 11) ☐ The oath or declaration is objected to by the Examiner. Note the attached Office Action or form PTO-152.

#### Priority under 35 U.S.C. § 119

- 12) ☐ Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).
- a) ☐ All b) ☐ Some \* c) ☐ None of:
1. ☐ Certified copies of the priority documents have been received.
  2. ☐ Certified copies of the priority documents have been received in Application No. \_\_\_\_\_.
  3. ☐ Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)).

\* See the attached detailed Office action for a list of the certified copies not received.

#### Attachment(s)

- |  |   |
|--|---|
| 1) <input checked="" type="checkbox"/> Notice of References Cited (PTO-892)  | 4) <input type="checkbox"/> Interview Summary (PTO-413)<br>Paper No(s)/Mail Date. _____ |
| 2) <input type="checkbox"/> Notice of Draftsperson's Patent Drawing Review (PTO-948)                                   | 5) <input type="checkbox"/> Notice of Informal Patent Application (PTO-152)             |
| 3) <input type="checkbox"/> Information Disclosure Statement(s) (PTO-1449 or PTO/SB/08)<br>Paper No(s)/Mail Date _____ | 6) <input type="checkbox"/> Other: _____  |

## **DETAILED ACTION**

### ***Notice To Applicant***

1. This communication is in response to the application filed on 12 December 2001.

Claims 1-20 are pending.

### ***Claim Rejections - 35 USC § 112***

2. The following is a quotation of the second paragraph of 35 U.S.C. 112:

The specification shall conclude with one or more claims particularly pointing out and distinctly claiming the subject matter which the applicant regards as his invention.

3. Claim 11 is rejected under 35 U.S.C. 112, second paragraph, as being indefinite for failing to particularly point out and distinctly claim the subject matter which applicant regards as the invention.

(A) Claim 11 recites "In a medical support *system*..." within the preamble, but recites method steps within the body of the claim and claim 11 is referred to as a method claim by dependent claims 12-20 (emphasis added). Examiner will assume Applicant intended claim 11 to recite a medical support "method."

***Claim Rejections - 35 USC § 103***

4. The following is a quotation of 35 U.S.C. 103(a) which forms the basis for all obviousness rejections set forth in this Office action:

(a) A patent may not be obtained though the invention is not identically disclosed or described as set forth in section 102 of this title, if the differences between the subject matter sought to be patented and the prior art are such that the subject matter as a whole would have been obvious at the time the invention was made to a person having ordinary skill in the art to which said subject matter pertains. Patentability shall not be negated by the manner in which the invention was made.

5. Claims 1-20 are rejected under 35 U.S.C. 103(a) as being unpatentable over Joao (6,283,761; hereinafter Joao), in view of Campbell et al. (6,047,259; hereinafter Campbell).

(A) As per claim 1, Joao discloses a medical support system including a memory for storing at least one medical support process relating to diagnosis and treatment of a medical condition, a processor responsive to the medical support process and to user inputs for performing the medical support process, an input device for user inputs relating to the medical support process and an output device for displaying the results of the medical support process to a user, comprising:

- (i) at least one medical record relating to a patient (Joao: abstract; col. 11, line 65-col. 12, line 17); and

- (ii) at least one medical support database including medical guidelines for the diagnosis and treatment of the medical condition (Joao: col. 16, line 33-col. 18, line 20).

Joao, however, fails to expressly disclose a medical support system including a memory for storing at least one medical support process relating to diagnosis and treatment of a medical condition, a processor responsive to the medical support process and to user inputs for performing the medical support process, an input device for user inputs relating to the medical support process and an output device for displaying the results of the medical support process to a user, comprising:

- (iii) a medical support process including at least one process phase each process phase including one or more process operations;
- (iv) each of the process operations of a process phase including:
  - (1) at least one process form providing an interface between a user and the process operations of the process phase, each process form including fields for passing user inputs to the process operations and for displaying the results of the process operations to the user; and
  - (2) at least one support process responsive to user inputs, the medical record and the guidelines for performing the process operations, wherein:

- (a) the support processes execute an interactive dialogue between the medical support process and the user to provide guidance to the user in performing the medical support process according to the guidelines and dependent upon the user inputs and the medical record.

Nevertheless, these features are old and well known in the art, as evidenced by Campbell. In particular, Campbell discloses a medical support system including a memory for storing at least one medical support process relating to diagnosis and treatment of a medical condition, a processor responsive to the medical support process and to user inputs for performing the medical support process, an input device for user inputs relating to the medical support process and an output device for displaying the results of the medical support process to a user, comprising:

- (iii) a medical support process including at least one process phase each process phase including one or more process operations (Campbell: abstract; col. 1, line 49-col. 2, line 42; fig. 1-14);
- (iv) each of the process operations of a process phase including:
  - (1) at least one process form providing an interface between a user and the process operations of the process phase, each process form including fields for passing user inputs to the

process operations and for displaying the results of the process operations to the user (Campbell: abstract; col. 1, line 49-col. 2, line 42; fig. 1-14); and

- (2) at least one support process responsive to user inputs, the medical record and the guidelines for performing the process operations (Campbell: abstract; col. 1, line 49-col. 2, line 42; fig. 1-14), wherein:

- (a) the support processes execute an interactive dialogue between the medical support process and the user to provide guidance to the user in performing the medical support process according to the guidelines and dependent upon the user inputs and the medical record (Campbell: abstract; col. 1, line 49-col. 2, line 42; fig. 1-14).

One of ordinary skill would have found it obvious at the time of the invention to combine the teachings of Campbell with the teachings of Joao with the motivation of managing medical information (Campbell: col. 1, lines 49-61).

- (B) As per claim 2, Joao discloses the medical support system of claim 1, wherein a medical support process includes:

- (i) a data phase for entering new information and reviewing historical information pertaining to the medical condition of the patient for the purposes of the medical support process (Joao: abstract; col. 19, line 64-col. 20, line 8); and
  - (ii) an assessment phase for evaluation of the patient's present medical condition based upon the information from the data phase and the guidelines for the diagnosis and treatment of the medical condition (Joao: abstract; col. 18, line 65-col. 19, line 7; col. 24, line 12-col.27, line 8).
- (C) As per claim 3, Joao discloses the medical support system of claim 2, wherein a medical support process further includes: a recommendations phase including process operations and guidelines to assist the user in determining a course of treatment for the patient (Joao: abstract; col. 11, line 65-col. 12, line 17; col. 16, line 33-col. 19, line 31).
- (D) As per claim 4, Joao fails to expressly disclose the medical support system of claim 1, wherein the process form fields include fields for the display and entry of data, text, prompts, messages and user decision options.

Nevertheless, these features are old and well known in the art, as evidenced by Campbell. In particular, Campbell discloses the medical support system of claim 1, wherein the process form fields include fields for the display and entry of data, text,

Art Unit: 3626

prompts, messages and user decision options (Campbell: abstract; col. 1, line 61-col. 2, line 1; fig. 1-14).

One of ordinary skill would have found it obvious at the time of the invention to combine the teachings of Campbell with the teachings of Joao with the motivation of managing medical information (Campbell: col. 1, lines 49-61).

(E) As per claim 5, Joao fails to expressly disclose the medical support system of claim 1, wherein the process form fields include process fields containing process calls invoking corresponding support processes upon corresponding user inputs to the process fields.

Nevertheless, these features are old and well known in the art, as evidenced by Campbell. In particular, Campbell discloses the medical support system of claim 1, wherein the process form fields include process fields containing process calls invoking corresponding support processes upon corresponding user inputs to the process fields (Campbell: abstract; col. 1, line 61-col. 2, line 1; fig. 1-14).

One of ordinary skill would have found it obvious at the time of the invention to combine the teachings of Campbell with the teachings of Joao with the motivation of managing medical information (Campbell: col. 1, lines 49-61).

(F) As per claim 6, Joao fails to expressly disclose the medical support system of claim 1, wherein the support operations include first support processes for invoking second support processes dependent upon user inputs.

Art Unit: 3626

Nevertheless, these features are old and well known in the art, as evidenced by Campbell. In particular, Campbell discloses the medical support system of claim 1, wherein the support operations include first support processes for invoking second support processes dependent upon user inputs (Campbell: abstract; col. 1, line 61-col. 2, line 1; fig. 1-14).

One of ordinary skill would have found it obvious at the time of the invention to combine the teachings of Campbell with the teachings of Joao with the motivation of managing medical information (Campbell: col. 1, lines 49-61).

(G) As per claim 7, Joao fails to expressly disclose the medical support system of claim 1, wherein the support processes include support processes for displaying a next process form.

Nevertheless, these features are old and well known in the art, as evidenced by Campbell. In particular, Campbell discloses the medical support system of claim 1, wherein the support processes include support processes for displaying a next process form (Campbell: abstract; col. 1, line 61-col. 2, line 1; fig. 1-14).

One of ordinary skill would have found it obvious at the time of the invention to combine the teachings of Campbell with the teachings of Joao with the motivation of managing medical information (Campbell: col. 1, lines 49-61).

Art Unit: 3626

(H) As per claim 8, Joao fails to expressly disclose the medical support system of claim 1, wherein the support processes include support processes for modifying the information displayed in a present process form.

Nevertheless, these features are old and well known in the art, as evidenced by Campbell. In particular, Campbell discloses the medical support system of claim 1, wherein the support processes include support processes for modifying the information displayed in a present process form (Campbell: abstract; col. 1, line 61-col. 2, line 1; fig. 1-14).

One of ordinary skill would have found it obvious at the time of the invention to combine the teachings of Campbell with the teachings of Joao with the motivation of managing medical information (Campbell: col. 1, lines 49-61).

(I) As per claim 9, Joao fails to expressly disclose the medical support system of claim 1, wherein the medical support databases reside within the support processes.

Nevertheless, these features are old and well known in the art, as evidenced by Campbell. In particular, Campbell discloses the medical support system of claim 1, wherein the medical support databases reside within the support processes (Campbell: abstract; col. 3, line 33-col. 5, line 67; fig. 1-14).

One of ordinary skill would have found it obvious at the time of the invention to combine the teachings of Campbell with the teachings of Joao with the motivation of managing medical information (Campbell: col. 1, lines 49-61).

Art Unit: 3626

(J) As per claim 10, Joao fails to expressly disclose the medical support system of claim 1, further comprising a dialect translator for translating between medical terms displayed to and entered by a user and corresponding equivalent but different medical terms employed in the support operations.

Nevertheless, these features are old and well known in the art, as evidenced by Campbell. In particular, Campbell discloses the medical support system of claim 1, further comprising a dialect translator for translating between medical terms displayed to and entered by a user and corresponding equivalent but different medical terms employed in the support operations (Campbell: abstract; col. 15, line 5-col. 16, line 65; fig. 1-14).

Examiner respectfully submits that abnormal observations are “translated” into corresponding equivalent but different terms as tentative diagnoses. For example, an abnormal observation symptom, such as “Shaking Head or Scratching,” is translated into a tentative diagnosis (i.e., an equivalent but different medical term), such as *Otitis Externa*. See reference numerals 904 and 908 of fig. 1.

One of ordinary skill would have found it obvious at the time of the invention to combine the teachings of Campbell with the teachings of Joao with the motivation of managing medical information (Campbell: col. 1, lines 49-61).

(K) Claim 11 is a method claim that substantially repeats the same limitations of claim 1, the corresponding system claim. Whereas system claim 1 recites a collection of structural elements, claim 11 recites a series of process steps corresponding to each

Art Unit: 3626

structural element in system claim 1. Therefore, because the collective teachings of Joao and Campbell disclose the structural elements that constitute the system of claim 1, it is respectfully submitted that they perform the underlying process steps, as well. As such, the limitations of claim 11 are rejected for the same reasons given above for claim 1 and incorporated herein.

(L) Claims 12-20 substantially repeat the same limitations of claims 2-10 and are therefore, rejected for the same reasons given for those claims.

### ***Conclusion***

6. The prior art made of record and not relied upon is considered pertinent to Applicant's disclosure. The cited but not applied art teaches systems, methods and computer program products for guiding the selection of therapeutic treatment regimens (6,081,786); a networked medical information system for clinical practices (US 2002/0022975); a computerized medical diagnostic and treatment advice system (6,113,540); and an authoring language translator (6,748,353).

The cited but not applied prior art also includes non-patent literature articles by Robert, Josephine J. ("MEDRIS: Design software engineering of a hypermedia medical record input system" 1991. Illinois Institute of Technology.) and Oliver, Neal Conrad, Ph.D. ("A sublanguage based medical language processing system for German" 1992. New York University.).

7. Any inquiry concerning this communication or earlier communications from the examiner should be directed to Mike Tomaszewski whose telephone number is (571)272-8117. The examiner can normally be reached on M-F 7:00 am - 3:30 pm.

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Joseph Thomas can be reached on (571)272-6776. The fax phone number for the organization where this application or proceeding is assigned is 571-273-8300.

Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see <http://pair-direct.uspto.gov>. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free).

MT

*MT* 1.22.06

  
C. LUKE GILLIGAN  
PATENT EXAMINER